24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
New Day for America	
	C C00581868
Check if X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
New Day Media, LLC	M M / D D / Y Y Y Y
Mailing Address 501 Morrison Road	04 29 2016 Amount
Suite 201	Amount
City State Zip Code	195765.00
Gahanna OH 43230	Transaction ID : SE.7110 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy Category/ Type	04 29 / 2016
Name of Federal Candidate Support Office	Sought: House District:
JOHN R KASICH Oppose	President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disbu	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	195765.00
	7 7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	4
(c) TOTAL Independent Expenditures	195765.00
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Buto	4 29 2016
Signature	